

“DC – One Community for All”

FY 2012 Summary

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District of Columbia Government Office of Disability Rights (ODR)
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Introduction

On June 22, 1999, the United States Supreme Court ruled in *Olmstead v. L.C.*, 527 U.S. 581, that the unjustified segregation or isolation of people with disabilities in institutions can constitute discrimination in violation of the Americans with Disabilities Act (ADA). Accordingly, the Court held that the ADA requires that States provide community-based treatment for persons with disabilities “when the State’s treatment professionals determine that such placement is appropriate, the affected persons do not oppose such treatment, and the placement can be reasonably accommodated, taking into account the resources available to the States and the needs of others with . . . disabilities.” 527 U.S. at 607.

In light of this decision, the District is instituting a comprehensive working plan to serve qualified individuals with disabilities in accordance with the Supreme Court’s holding in *Olmstead*. This plan establishes certain goals to help ensure that community-based treatment is provided to persons with disabilities, when such treatment is appropriate. However, this plan does not create independent legal obligations on the part of the District.

A wide range of District stakeholders, including persons with disabilities and Mayor Vincent C. Gray, supported the Office of Disability Rights in developing the Olmstead Community Integration Plan in accordance with policies and procedures outlined in D.C. Act 16-595 of the Disability Rights Protection Act of 2006. The District values its residents with disabilities as contributing members of society and understands the cost benefits of supporting them with integrated, community-based services. The District’s Olmstead Community Integration Plan, ***One Community for All*** is a policy document that details the rights of each person with a disability to self-determination in the District of Columbia.

The vision of ***One Community for All*** is to ensure that District of Columbia residents will have access to person-centered services and community-based support options that will maximize choice, self-direction, and dignity. ***One Community for All*** offers a framework for allowing individuals to choose where they want to live in the community with the appropriate supports and services, consistent with the Olmstead decision and the resources available to the District to serve such individuals. The Plan is a living document, providing specific goals, action steps, and tools, while allowing for better flexibility and improved services for individuals with disabilities.

Nine (9) District agencies participating in this initiative are responsible for implementing the Plan. These District agencies include: Office of the State Superintendent for Education (OSSE), Office on Aging (DCOA), Department of Youth Rehabilitation Services (DYRS), Department of Disability Services (DDS), Department of Human Services (DHS), Department of Mental Health (DMH), Child and Family Services Agency (CFSA), DC Public Schools (DCPS), and the Department of Health Care Finance (DHCF).

The Role of the Office of Disability Rights (ODR)

The Office of Disability Rights (ODR) collaborates with the nine District agencies participating in the ***One Community for All*** initiative:

1. To monitor progress toward each agency's monthly and annual goals, and to report such progress to the Executive Office of the Mayor, relevant city officials, and other community stakeholders.
2. To facilitate communication and collaboration between agency members, agency leadership, and residents with disabilities directly affected by the initiative.
3. To cultivate an inclusive atmosphere in which District residents with disabilities can interact with the government and the community in which they live while enjoying the benefits and privileges of the initiative's four (4) guiding principles: diversity, respect and dignity, flexibility, and empowerment.

Agency Analyses

1. Office of the State Superintendent for Education (OSSE)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Desiree Brown	Hosanna Mahaley-Johnson

FY '12 Goal - Number of Persons to be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
Not Applicable ¹	Not Applicable	Not Applicable

Internal Goal Progress

Prior to issuing the policies on “Least Restrictive Environment and Inclusion,” and the Policies and Procedures for Placement Review, OSSE obtained stakeholder input through public hearings and the federally mandated State Advisory Panel (SAP) on Special Education.

OSSE also announced the release of the DSE Section 504 of the Rehabilitation Act of 1973 toolkit. The guidance and model forms are designed to assist LEAs in complying with requires of Section 504 of the Federal Rehabilitation Act of 1973. The 504 toolkit can be viewed by clicking [here](#).

OSSE sponsored the District’s Inclusive Schools Week (ISW) 2012. ISW is celebrated nationally the first week of December. In 2012, it occurred the week of December 3rd – 7th. The planning committee identified and executed an event to kick-off ISW activities and coordinated a city-wide summit. The summit convened on November 29, 2012, at George Washington University. A webpage and contact email address was created to communicate with the community regarding ISW.

External Goal Progress

Children & Youth in Residential Facilities for whom OSSE pays Special Education Costs (as of 10/05/2012)

In August 2011, OSSE was invoiced for 219 students receiving special education services in a PRTF or RTC. As of October 5, 2012, OSSE has received August invoices for 116 students in such placements.

¹ The Office of the State Superintendent of Education (OSSE) FY 2012 Goal is listed as “not applicable” because OSSE does not work directly with individual DC residents to achieve their personal goal of transition from institutional settings into the community.

Facility	Aug 2011	Sep 2011	Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012	Aug 2012
Psychiatric Residential Treatment Facilities	86	84	81	71	80	68	68	68	68	65	55	52	56
All Other Residential Treatment Centers	138	142	141	137	130	137	131	116	126	119	102	69	61
Residential Total	219	226	222	207	210	205	198	184	192	180	156	121	116

2. Office on Aging (DCOA)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Chantelle Teasdell	John M. Thompson

Agency FY '12 Goal - Number of Persons to be Moved to Community Services	Agency Progress On FY '12 Goals	Percentage of Agency FY '12 Goal Met
60	41	68%

Internal Goal Progress

Bi-monthly Hospital Discharge Planning Advisory Council meetings shared best practices surrounding the issue of discharge planning to ultimately develop a universal person-centered discharge planning process to be implemented at all participating hospitals in the District of Columbia. DCOA/ADRC also collaborated with DHCF, through a Memorandum of Understanding, to assist nursing facility residents in transitioning into community-based settings. The numbers reflected in the transitional count are only individuals discharged from various hospital settings.

External Goal Progress

In FY '13, DCOA/ADRC will continue to foster and strengthen its relationships with case managers, discharge planners, social workers, and other hospital staff to collaborate on efforts in order to implement "The Bridge Model" to transition consumers from the hospital into the community with the appropriate home and community based services.

3. Department of Youth Rehabilitation Services (DYRS)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Adam Al-Joburi	Neil Stanley

Agency FY '12 Goal - Number of Persons to be Moved to Community Services	Agency Progress On FY '12 Goals	Percentage of Agency FY '12 Goal Met
30	113	377%

Internal Goal Progress

DYRS surpassed its FY '12 goal of returning thirty (30) youth to community-based services. These youth transitioned from a Psychiatric Residential Treatment Facility (PRTF) or other Residential Treatment Center (RTC).

External Goal Progress

Youth were released to the community and received services from DC "Youthlink" or a Therapeutic Family Home.

4. Department on Disability Services (DDS)

Community Integration (Olmstead Plan)Coordinator	Agency Leadership
Shasta Brown	Laura Nuss

FY '12 Goal - Number of Persons to be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
20	16	80%

Internal Goal Progress

DDS conducted three (3) outreach activities per quarter (including service provider fairs, inter-agency liaison assignments, and relationship building with community resources). Some of those outreach activities included attending the Georgetown University Community Excellence in Developmental Disabilities Consumer Advocacy Group meetings; conducting a panel presentation for SAMSHA Wellness Week to the Consumer Action Network; and other meetings and presentations with community members with disabilities, their families, and other relevant stakeholders.

External Goal Progress

DDS reduced the number of people receiving services in congregate settings by sixteen (16) individuals in FY '12. These individuals transitioned to community-based placements where they received needed support services. Through DDS efforts in FY '12, one (1) qualified service provider was approved to provide in-home services in order to meet identified service gaps.

5. Department of Human Services (DHS)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Fred Swan	David A. Berns

FY '12 Goal - Number of Persons to be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
136	145	106%

Internal Goal Progress

In FY12, DHS transitioned one-hundred and forty-five (145) persons with disabilities from homeless shelters to apartments through its Permanent Supported Housing Program. Clients who were housed were then connected to case management providers who had the responsibility of connecting clients to services as needed.

External Goal Progress

DHS collaborated with community partners, and homeless outreach services to identify and locate qualified persons with disabilities for the Permanent Supported Housing Program.

6. Department of Mental Health (DMH)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Vivi Smith	Steve Baron

FY '12 Goal - Number of Persons to be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
75	121	161%

Internal Goal Progress

DMH provided monitoring and oversight to one-hundred and forty-seven (147) youth with behavioral health issues in Psychiatric Residential Treatment Facilities (PRTF) or Residential Treatment Centers (RTC). This program has a Review Committee that evaluates all potential placements. The Review Committee recognizes that removing children and youth from their homes and communities is a serious decision, and DMH considers community support options with a multidisciplinary approach.

External Goal Progress

The DMH Division of Integrated Care continued its work with the Office of Consumer Affairs and a program that hires DMH consumers to work as Transition Specialists to assist patients with their transition from Saint Elizabeths Hospital to appropriate community placements with support services. On September 30, 2012, Saint Elizabeths Hospital reported a census of two hundred seventy-nine (279), down from two hundred ninety one (291) individuals on October 1, 2011.

7. Child and Family Services Agency (CFSA)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Julie Fliss	Brenda Donald

FY '12 Goal - Number of Persons to be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
5	19	380%

Internal Goal Progress

In FY '12, there was continued collaboration between District agencies and facility treatment teams assuring that all residential treatment and discharge decisions and plans were timely and adhered to the least-restrictive philosophy congruent with community integration. Levels of Care (LOC) certifications were reviewed every 6 months after the initial authorization for treatment, and if additional treatment time was needed, the treatment goals and expected length of stay were thoroughly evaluated and planned by the multi-agency team. The teams met weekly and included representatives from CFSA, DMH, DYRS, OSSE, and parent membership.

External Goal Progress

CFSA agreed that in FY '12 the Agency would transition five (5) cases from the Psychiatric Residential Treatment Facility (PRTF) population. Nineteen (19) youth successfully transitioned in FY '12, which surpassed the goal. Two (2) cases remained in PRTFs under regular review from the October 15, 2011 baseline population.

8. DC Public Schools (DCPS)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Joshua Wayne	Kaya Henderson

FY '12 Goal - Number of Persons to Be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
8	8	100%

Internal Goal Progress

In FY '12, DCPS continued to actively identify community-based transitional services for parents and students.

External Goal Progress

DCPS monitored two-hundred and eight (208) students in residential facilities. Eight (8) students placed by DCPS have returned from residential facilities this fiscal year. DCPS has met its FY '12 goal for the initiative.

9. Department of Healthcare Finance (DHCF)

Community Integration (Olmstead Plan) Coordinator	Agency Leadership
Leyla Sarigol	Wayne Turnage

FY '12 Goal - Number of Persons to Be Moved to Community Services	Progress on Agency FY '12 Goals	Percentage of FY '12 Goal Met
60	20	33%

Internal Goal Progress

The Money Follows the Person (MFP) demonstration's selection process for nursing home residents who are eligible for the EPD Waiver target group is under review for FY '13 approval. The proposed selection process includes prioritization of residents who have housing and information care supports. A lottery is proposed for MFP candidates who need subsidized housing and have not already secured it.

External Goal Progress

Barriers to transition from nursing homes continue to be the location of community-based housing and the length of time required to align community-based supports, including ongoing primary care and behavioral health supports.